



Radioactive Waste Label Instructions

 RADIOACTIVE WASTE HANDLE WITH CARE! 	
Generator Name: 1	Phone #: 2
Waste Description: 3	Disposal requisition # 8
	Sample analysis # 9 if analyzed:
	Workplace start date 10
pH 4 (if aqueous liquid)	WAA receipt or accumulation start date** 11
Radionuclides (major 5): 5	HWM receipt date : 12
6 Waste Form <i>check only one</i> <input type="checkbox"/> Gas <input type="checkbox"/> Liquid <input type="checkbox"/> Solid <input type="checkbox"/> Sludge (store as liquid)	Contact Reading mrem/hr 7 <input type="checkbox"/> $\beta\gamma$ <input type="checkbox"/> γ <input type="checkbox"/> NEUTRON
<div style="display: flex; justify-content: space-between;"> <div> 4280-70979 </div> <div> Rev 5.93 </div> </div>	

① Generator: Name of individual who has generated the waste. Must be the same name as is on the accompanying waste requisition.

② Phone #: Lab phone number of the generator.

③ Waste Description: Describe the chemical composition of the waste with quantity/volume and type, (e.g., coolant waste water, 5 gallons). *Note:* if a brand name is listed the type of waste stream is also required (e.g., aqueous, oil).

④ pH: List the pH if aqueous liquid.

⑤ Radionuclides List a maximum of 5 nuclides in descending order based on activity. If you need assistance in identifying the major radionuclides contact your HWM Field Tech or Environmental Analyst.



⑥ Waste Form: Check appropriate box (one only). *Note** Different waste forms must be segregated in separate containers.

⑦ Contact Reading State the maximum measured beta-gamma, gamma, or neutron dose at surface contact (units in mR/hr). Indicate radiation type. The Hazards Control Health and Safety Tech conducts these readings.

⑧ Disposal Requisition: Copy the number (in bold type) from the upper left-hand corner of the waste disposal requisition form.

⑨ Sample analysis #: If the waste has been analyzed, copy the seven-digit sample number from the CES Chain of Custody form.

Radioactive Waste Label Instructions (continued)

 RADIOACTIVE WASTE HANDLE WITH CARE! 	
Generator Name: 1	Phone # 2
Waste Description 3	Disposal requisition # 8
	Sample analysis # 9
	if analyzed:
pH 4 (if aqueous liquid)	Workplace start date 10
Radionuclids (major 5): 5	WAA receipt or accumulation start date** 11
	HWM receipt date : 12
6 Waste Form <i>check only one</i> <input type="checkbox"/> Gas <input type="checkbox"/> Liquid <input type="checkbox"/> Solid <input type="checkbox"/> Sludge (store as liquid)	Contact Reading 7 <input type="checkbox"/> $\beta\gamma$ <input type="checkbox"/> γ <input type="checkbox"/> NEUTRON
13 <i>HWM use only</i>	

** Receipt date from workplace or accumulation start date in the WAA

Lawrence Livermore National Laboratory
7000 East Ave., Livermore, CA 94550

4280-70979 Rev 5.93

10 **Workplace start date:** The date radioactive waste was first put into the waste container.

For waste accumulated at the WAA, use the "WAA receipt or accumulation date" (see item #11).

11 **WAA receipt or accumulation start date:** The date waste from the workplace first arrived at the WAA. Receipt date can be no later than three days after the workplace end date. (Note: the 90-day accumulation time in the WAA is calculated from the workplace end date, not the WAA receipt date.)

12 **HWM receipt date:** Filled out by HWM when the waste enters the HWM facility. HWM has one year from the receipt date to transport the waste off-site.

13 **HWM use only:** This space is for future HWM use.